



# FAIRFAX COUNTY ANIMAL SHELTER

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## Volunteer Application

Thank you for your interest in volunteering for the Fairfax County Animal Shelter, a department within the Animal Services Division of the Fairfax County Police Department! Volunteers are an essential part of the shelter team. We have more than 170 volunteers who care for our animals' basic needs and provide enrichment to enhance their overall quality of life.

### Please note:

1. Those interested in volunteering must be at least 18 years old. The shelter does not have a junior volunteer program for those under 18 years of age.
2. There is a required time commitment of at least six hours per month for six months. Many volunteers choose to stay longer than six months, and the six hour minimum per month still applies.
3. If you are a college student interested in helping for the summer only, you must apply by May 1 and meet the time commitment of six hours per month. The six month minimum is waived.
4. The shelter does not accept temporary volunteers seeking to satisfy a court-ordered community service requirement.
5. Not all individuals who apply are accepted into the volunteer program.
6. If you are interested in the foster program, please complete the application addendum (Sections VII & VIII).

### Application Deadlines:

Applications are processed on a bi-monthly basis. The deadlines for each cycle are January 1, March 1, May 1 (especially for college students interested in summer only), July 1, September 1 and November 1. Applications received after these dates will be considered during the next application cycle. Applications for fostering are processed on an ongoing basis.

### Section I – Personal Information

Full Name: \_\_\_\_\_ Today's date: \_\_\_\_\_  
Last First M.I.

Home Phone: ( ) Work Phone: ( )

Cell Phone: ( ) Email address (required): \_\_\_\_\_

Are you: ☐ Employed ☐ Not Employed ☐ Retired ☐ College Student

List your occupation and employer OR your school: \_\_\_\_\_

Due to specific liability concerns, volunteers must be able to work independently. Please list any restrictions that could affect your ability and/or availability to participate as a volunteer, including medical, physical and scheduling limitations.

Have you ever been charged with or convicted of a crime? ☐ Yes ☐ No

If yes, explain: \_\_\_\_\_

### Section II – Interests & Availability

Please check the area of interest you have as a volunteer candidate. You may select cat or dog but not both. In addition to one of these areas of interest, you may select foster care provider (see Sections VII & VIII to learn more about fostering).

☐ Dog Kennel Assistant ☐ Cat Room Assistant ☐ Foster Care Provider (application addendum needed)

Can you make a six month commitment to the shelter? ☐ Yes ☐ No ☐ Unsure if I can

On average, how many hours can you commit each month? \_\_\_\_\_ Please list below your preferred days and times:

Monday: \_\_\_\_\_ Tuesday: \_\_\_\_\_ Wednesday: \_\_\_\_\_ Thursday: \_\_\_\_\_

Friday: \_\_\_\_\_ Saturday: \_\_\_\_\_ Sunday: \_\_\_\_\_

I am a college student interested in volunteering for the summer only. I am not subject to the six month minimum, but I must still volunteer at least six hours a month. ☐ Yes ☐ No

### This section for animal shelter use only

Received:	MI:	BC Date:	P <input type="checkbox"/> or F <input type="checkbox"/>	Info Session:
Training: C <input type="checkbox"/> or D <input type="checkbox"/>	Mentor:	PIN:	Uniform: Y <input type="checkbox"/> or N <input type="checkbox"/>	Handbook: Y <input type="checkbox"/> or N <input type="checkbox"/>

### Section III – Authorization for Criminal History Record Check

I do hereby authorize a criminal history record check concerning myself, by and to duly authorized agents of the Fairfax County Police Department. I emphasize that the intent of this authorization is to provide information for the specific purpose of pursuing a background investigation which may provide pertinent data for the Fairfax County Police Department to consider in determining my suitability for volunteer services for the Fairfax County Animal Shelter. A digital signature on this release form will be valid even though said digital signature does not contain the writing of my signature. A photocopy of this release form will be valid as an original hereof, even though said photocopy does not contain an original writing of my signature.

**All fields MUST be completed in order to carry out the criminal history record check. Failure to supply all requested information will prevent your application from being processed.**

Name: \_\_\_\_\_  
*Last First (legal name; no nicknames please) M.I.*

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ Race: \_\_\_\_\_ Maiden name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The penalty for disseminating information obtained by this request is a Class 2 Misdemeanor in accordance with § 19.2-389, Code of Virginia, 1950 as amended.*

### Section IV – Volunteer Agreement

I agree to hold harmless Fairfax County, its officers and employees from any and all liability that might be incurred during the course of my volunteer service. I agree to comply with the Animal Services Division's rules and procedures. I agree to respect the confidential nature of the information I may obtain. I understand that my failure to follow the policies and rules of the Animal Services Division will result in the termination of my services as a volunteer. I understand that as a volunteer, I serve at the discretion of the Commander of the Animal Services Division and my volunteer status may be terminated at any time for any reason.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Section V – Emergency Contact Information

Name: \_\_\_\_\_  
*Last First*

Phone: ( ) \_\_\_\_\_  
*Work Home Cell*

Relationship to you: \_\_\_\_\_

### Section VI – Other Information

Do you have pets? ☐ Yes ☐ No Are they spayed/neutered? ☐ Yes ☐ No

Describe any previous or current volunteer experience: \_\_\_\_\_

What would you say are your strengths? \_\_\_\_\_



# Foster Application Addendum

Only those interested in fostering should complete Sections VII & VIII

The Fairfax County Animal Shelter's foster program focuses on providing temporary housing for animals in need. Volunteers open their homes to animals who require extra attention and care, including those who need socialization to prepare them for adoption and those who need medical care.

## Section VII – Foster Program Questions & Interests

Do you own or rent your home? ☐ Own ☐ Rent

Is your home\*: ☐ Single-family home ☐ Townhouse ☐ Condominium ☐ Apartment

*\* If you are renting, you must furnish a copy of your lease showing any pet restrictions as well as receipt of payment of any required pet deposit.*

Please list any previous foster experience: \_\_\_\_\_

Are you a member of a rescue or humane organization or any other organization that would help you in a foster role? \_\_\_\_\_

Besides a love for animals, why are you interested in fostering? \_\_\_\_\_

Have you ever been charged with or convicted of animal cruelty, neglect or abandonment? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

Who will participate in caring for fosters other than you? \_\_\_\_\_

Please list the areas of interest you have as a foster candidate:

☐ **Mother cat with kittens:** Provide foster care for a mother cat and kittens until the age when the kittens are old enough for adoption (typically eight weeks old). Continue to care for the mother cat for an additional five more days until the mother cat has stopped lactating and can be spayed.

☐ **Pregnant cat:** Provide foster care for a pregnant cat during pregnancy and through the whelping process. Continue to provide foster care for the mother cat and kittens until the kittens are old enough for adoption (typically eight weeks old). Continue to care for the mother cat for an additional five or more days until the mother cat has stopped lactating and can be spayed.

☐ **Kittens without the mother cat:** Provide foster care for a litter of kittens until the kittens are old enough for adoption (typically eight weeks old).

☐ **Kittens without the mother cat requiring bottle-feeding:** Provide foster care for a young litter of kittens without the mother cat, requiring bottle-feeding, until the kittens are old enough for adoption (typically eight weeks old).

☐ **Adult cat:** Provide foster care for an adult cat.

☐ **Dog:** Provide foster care for dogs that need a little extra TLC.

☐ **Puppies**

☐ **Rabbit**

☐ **Guinea Pig**

☐ **Rat / Mouse / Hamster / Gerbil** (circle those you are willing to foster)

## Section VIII – Foster Agreement

I agree to hold harmless Fairfax County, its officers and employees from any and all liability that might be incurred during the course of foster service, unless due to the County's gross negligence. I agree to comply with the Animal Services Division's rules and procedures. I agree to respect the confidential nature of the information I may obtain. I understand that my failure to follow the policies and rules of the Animal Services Division will result in the termination of my services as a foster care provider. I understand that as a volunteer, I serve at the discretion of the Commander of the Animal Services Division and my foster status may be terminated at any time, with or without cause.

I will contact the Animal Services Division immediately in the event of any change in my name, address, or telephone number.

I will contact the Animal Services Division immediately in the event of any problems with the foster animal. I will not take the animal(s) to a veterinarian without first contacting a representative of the Fairfax County Animal Shelter for permission and instruction. I further understand that if I do, I will be responsible for any cost incurred.

I understand that, due to health risks, I will confine the foster animal(s) to my premises. I understand that these animals may not yet have received full vaccination series for rabies and distemper, among other diseases. I will notify the Animal Services Division if any fosterling bites me or any member of my family, regardless of the severity of the injury.

In the event my circumstances change and I find I cannot give the animal(s) the time and attention necessary to properly care for it, as instructed, I will immediately contact the Fairfax County Animal Shelter to schedule the return of the foster animal(s).

I will return the animal(s) to the Fairfax County Animal Shelter on the date specified in the foster contract unless a representative of the Fairfax County Animal Shelter alters this date. I further understand that if I fail to return the animal(s) by the designated date, the Animal Services Division will remove the animal(s) from my care.

I understand that the Fairfax County Animal Shelter has sole discretion as to the welfare of the animal(s) listed above and that they may demand the return of the foster animal(s) at any time during the foster period.

I understand that there is no guarantee that the animal I foster will be deemed adoptable. I understand that foster animals remain the property of the Fairfax County Animal Shelter at all times. I understand that any foster animal(s) may or may not be put up for adoption. I understand that the Fairfax County Animal Shelter has sole and complete authority to put the animal(s) up for adoption, extend the foster period, or euthanize the animal(s).

In the event that I wish to become the owner of the animal(s), I must apply for adoption through the normal Fairfax County Animal Shelter procedures, which may include returning the animal(s) to the shelter and/or a home visit. I further understand that fostering of animal(s) does not necessarily guarantee approval for adoption.

I will not surrender possession of any foster animal(s) to anyone other than a representative of the Fairfax County Animal Shelter. I understand that I have no right to keep or place any foster animal(s) in other homes or with persons other than those designated in this contract.

I agree not to declaw any cat that I foster or adopt through the shelter's foster program.

I agree to permit representatives of the Fairfax County Animal Shelter to inspect the premises on which any foster animals are kept for the duration of the foster contract. I understand that the Fairfax County Animal Shelter will require regular home check-ups while I am fostering an animal and I will be available as required.

I will keep my own animals separate from any foster animal(s). In accordance with Title 3.1, Section 3.1-796.68, Code of Virginia, 1950 as amended, I agree that I shall also provide for each of my own companion animals: adequate food; adequate water; adequate shelter that is properly cleaned; adequate space in the primary enclosure for the particular type of animal depending upon its age, size, species, and weight; adequate exercise; adequate care, treatment, and transportation; and veterinary care when needed or to prevent suffering or disease transmission.

I understand that I will not be reimbursed for any expenses related to damage or injury from my foster animal to myself, my family or my home or for veterinary expenses for my animals.

I understand that if I violate any of the Animal Services Division's rules and procedures, or any of the above statements, the Fairfax County Animal Shelter will require the immediate return of the foster animal(s) in my care and I will be terminated from the foster program.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_